

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER VIBORG ENTERPRISE/HURLEY LEADER		2. DATE 09/29/14
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ \$28/\$32
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) P.O. BOX H, CENTERVILLE, TURNER, SD 57014		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) STAR Publishing P.O. Box H, Centerville, SD 57014		
6. FULL NAME OF PUBLISHER: Shane & Allyson Hill 1000 Washington St., Centerville, SD 57014		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">FULL NAME Shane & Allyson Hill 1000 Washington St., Centerville, SD 57014</div> <div style="width: 45%;">COMPLETE MAILING ADDRESS Shane & Allyson Hill 1000 Washington St., Centerville, SD 57014</div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	1000	1000
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.	280	295
2. Mail Subscription (Paid and or requested)	621	600
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	901	895
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	32	32
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	11	10
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	944	937
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	56	63
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1000	1000

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Allyson Hill
(Signature)

Owner/Publisher
(Title)

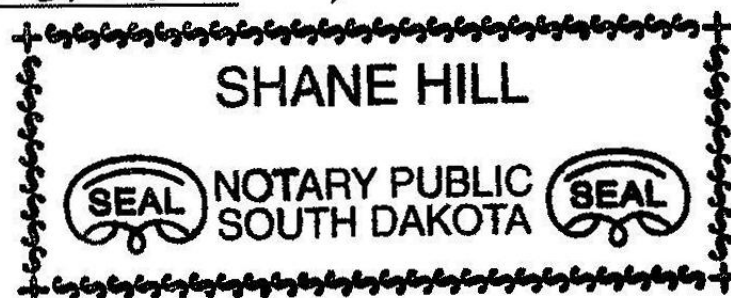
State of South Dakota)

Sworn to before me this 4 day of December, 20 14

County of Turner)
§

Shane Hill
Notary Public

(Seal)



My commission expires: 11-14-18